٠ ,							Application or Docket Number					
PATEI	NT APPLICATEM	TION FEE ective Oct			TON REC	OR	P	09/	90	869	77	
CLAIMS AS FILED - PART I							SMALL	ENTITY			R THAN	
[	(Colui	(Column 1) (Column 2)			7	TYPE		OF	SMALL	ENTITY	╛	
TOTAL CLAIMS					·		RATE	FEE	_	RATE	FEE	4
FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FI	€ 385.0	OF	BASIC FEE	770.00	1
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ir the entry in cotu If the "Highest Nu	imn 1 is less than th imber Previously Pa	e entry in colu iid For IN THIS	mn 2, write 10 S SPACE is le	in colu ss than	mn 3. 20; enter`*20.	. <u>~</u>	TOTAL OIT, FEE	·	OR	TOTAL DOIT, FEE		
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